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THE UNIXED STATES PATENT AND TRADEMARK OFFICE

Applicant: Burke et al.)	Group Art Unit: Not yet assigned
Serial No.: 09/998,718; Conf No. 7192)))	I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Box Supplemental IDS-Non-Fee, Commissioner for Patents, Washington, D.C. 20231 on: Date of Deposit:
Filed: November 1, 2001)	
For: Methods and Compositions)	Date of Signature: ///2/2002
for Treatment of Ocular Neo-)	/ /
Vascularization and Neural Injury)	
)	•
Examiner: Not yet assigned)	
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INFORMATION DISCLOSURE STATEMENT

Assistant Commissioner for Patents Washington, D.C. 20231

Dear Sir:

Applicant herewith submits forms PTO 1449 for consideration by the Examiner, consistent with the provisions of 37 CFR § 1.97 and 1.98. By submitting this Information Disclosure Statement, Applicant makes no admission that any item listed thereupon is material to the patentablility of the invention claimed in the above-entitled patent application. Further, Applicant makes no assertion hereby that a search was conducted, or if conducted, that any search was thorough.

Applicant respectfully requests that the Examiner indicate consideration of the presently cited references by returning the enclosed Form 1449 bearing the Examiner's initials and the date considered.

As this Information Disclosure Statement is being submitted prior to three months after the filing date of this Application, no fee or certification is thought to be required, pursuant to 37 CFR §1.97(b). If Applicant is in error in this regard, please use Deposit Account 01-0885 for payment of any fee that may be due.

Respectfully submitted,

Date: 1/17/02

Carlos A. Fisher Reg. No. 36,510 ALLERGAN, INC.

T2-7H

2525 Dupont Drive

Irvine, CA 92612 Tel: 714-246-4920

Fax: 714-246-4249